## FITZPATRICK, CELLA, HARPER & SCINTO

30 Rockefeller Plaza New York, NY 10112-3801 (212) 218-2100

Pacsimile: (212) 218-2200

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### **FACSIMILE COVER SHEET**

TO:	Examiner C. Onuaku USPTO - TC/Art Unit 2616		
FROM:	Raymond A. DiPerna (Reg. No. 44,063)		
RE:	U.S. Patent Appln. No. 09/543,3 Attorney Docket: 00169.001658		
FAX NO.:	571-273-8300		
DATE:	March 10, 2006	NO. OF PAGES: (Including cover page)	
TIME:		SENT BY:	

### MESSAGE

### Attached please find an Amendment After Final Action.

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office (Fax No. 571-273-8300) on

March 10, 2006
(Date of Transmission)

Raymond A. DiPerna (Reg. No. 44,063)
(Name of Attorney for Applicant)

March 10, 2006

(Date of Signature)

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NY\_MAIN 383332v2

# RECEIVED CENTRAL FAX CENTER MAR 1 0 2006

Amendment Under 37 C.F.R. § 1.116
Expedited Procedure
TC/Art Unit 2616

In re Application of:

Docket No. 00169,001658

JULIE RAE KOWALD

Application No.: 09/543,330

Examiner: C.O. Onuaku

Filed: April 5, 2000

TC/Art Unit: 2616

For: AUTOMATED VISUAL IMAGE EDITING SYSTEM

Date: March 10, 2006

Mail Stop: AF COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final Action in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE_	ADDITIONAL FEE
TOTAL CLAIMS	* 67	MINUS	** 87	= 0	x \$25 \$50	\$0
INDEP. CLAIMS	* 6	MINUS	6	= 0	x \$100 \$200	\$0
Fee for Multiple Dependent claims \$180/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0	

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	A check in the amount of \$_ is enclosed.			
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed			
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.			
	A check in the amount of \$ to cover the fee for amonth extension is enclosed.			
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.			
X	Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.			
	Respectfully submitted,			
	Raymond A. DiPerna Attorney for Applicant Registration No. 44,063			

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200

Form #120

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Amendment Under 37 C.F.R. § 1.116 Expedited Procedure TC/Art Unit 2616

00169.001658

PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)
	: Examiner: C.O. Onuaku
JULIE RAE KOWALD	)
	: TC/Art Unit: 2616
Application No.: 09/543,330	)
	:
Filed: April 5, 2000	)
•	:
For: AUTOMATED VISUAL IMAGE	)
EDITING SYSTEM	: March 10, 2006

Mail Stop: AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

### **AMENDMENT AFTER FINAL ACTION**

Sir:

In response to the Office Action dated January 11, 2006, the Examiner is respectfully requested to amend the above-identified application as follows pursuant to 37 C.F.R. § 1.116:

I hereby certify that this correspondence is being transmitted via facsimile to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, (571) 273-8300, on

March 10, 2006
(Date of Deposit)

Raymond A, DiPerna (Reg. No. 44,063)

Rayman a (Name of Attorney for Applicant)

March 10, 2006

Signature Date of Signature